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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Mykelle | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for example, your driver's | Middle name Walker | Middle name |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years Include your married or maiden names. | Middle name | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 5063 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Mykelle First Name | Middle Name | Walker Last Name | Case number (if | known) | |
|--|--|--|-----------------|--|-------------------------|
| | About Debtor 1: | | About Deb | tor 2 (Spouse Only in | a Joint Case): |
| 4. Any business names and Employer | I have not used any bu | siness names or EINs. | I have n | ot used any business nar | mes or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | | Business na | ame | |
| 8 years Include trade names and | Business name | | Business n | ame | |
| doing business as names | EIN | | EIN | | |
| | EIN | | EIN | | |
| 5. Where you live | 1017 M Of at Chroat Apt 0 | | If Debtor 2 | lives at a different addre | ess: |
| | Number Street Street | | Number | Street | |
| | Chicago Illinois City State | 60620 Zip Code | City | State | Zip Code |
| | Cook | | _ | | |
| | If your mailing address is above, fill it in here. Note notices to you at this mailing | that the court will send any | | s mailing address is die. Note that the court will address. | |
| | Number Street | | Number | Street | |
| | City Stat | e Zip Code | City | State | Zip Code |
| 6. Why you are choosing this district | Check one: | | Check one: | | |
| to file for bankruptcy | | before filing this petition, I have er than in any other district. | | e last 180 days before filin this district longer than in | |
| | I have another reason. | Explain. (See 28 U.S.C. §§ 1408 | .) I have a | nother reason. Explain. (S | See 28 U.S.C. §§ 1408.) |
| | | | - | | |
| | | | - | | |
| | | | - | | |
| | | | - | | |
| | | | | | |

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| De | ebtor 1 Mykelle | | | Case number (if know | wn) |
|-----|---|--|---|--|---|
| | First Name | Middle Name | Last Name | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankruptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description Bankruptcy (Form B2010)). Also, Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | |
| 8. | How you will pay the fee | more details about how you cashier's check, or money of may pay with a credit card of a line of the cashier's check, or money of may pay with a credit card of the cashier's check, or money of may pay with a credit card of may pay with a credit card of the line of the cashier ca | u may pay. Typically, if you order If your attorney is or check with a pre-printe stallments. If you choose ling Fee in Installments (O vaived (You may request ired to, waive your fee, and applies to your family sing must fill out the Application. | ou are paying the submitting your ed address. ethis option, sign fficial Form 103/2 this option only d may do so only ze and you are u | he clerk's office in your local court for efee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | No. Go to line 12. | Statement About an Eviction | | you want to stay in your residence? t You (Form 101A) and file it with |

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Mary L LLC A sole proprietorship Name of business, if any is a business you operate as an 656 E. 156th Place individual, and is not a Number Street separate legal entity such as a corporation, partnership, or LLC. If you have more than South Holland Illinois 60473 one sole City State Zip Code proprietorship, use a separate sheet and Check the appropriate box to describe your business: attach it to this Health Care Business (as defined in 11 U.S.C. § 101(27A)) petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Mykelle
 Walker
 Case number (if known)

 Last Name

| Pa | rt 5: Explain Your Effor | rts to Receive a Brie | fing About Credit Counseling | | | |
|--|--|---|--|----|---|--|
| | | About Debtor 1: | | Al | bout Debtor 2 (Sp | oouse Only in a Joint Case): |
| 15. | Tell the court | You must check one: | | Yo | ou must check one: | |
| | whether you have received briefing about credit counseling. | counseling agen | ing from an approved credit cy within the 180 days before I ptcy petition, and I received a npletion. | | counseling ager | ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion. |
| | The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | he certificate and the payment plan, veloped with the agency. |
| | about credit counseling before you file for bankruptcy. You must truthfully | counseling agen | ing from an approved credit cy within the 180 days before I ptcy petition, but I do not have a npletion. | | counseling ager | ring from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion. |
| | check one of the following choices. If you cannot do so, you are not eligible to file. | | er you file this bankruptcy petition, opy of the certificate and payment | | | er you file this bankruptcy petition, opy of the certificate and payment |
| If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. | | from an approve obtain those ser made my reques | ked for credit counseling services d agency, but was unable to vices during the 7 days after I t, and exigent circumstances emporary waiver of the | | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the |
| | | requirement, attac efforts you made t unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and imstances required you to file this | | requirement, attace efforts you made unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this |
| | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. |
| | | receive a briefing must file a certifica with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | | receive a briefing must file a certification with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |
| | | | ne 30-day deadline is granted only mited to a maximum of 15 days. | | | he 30-day deadline is granted only mited to a maximum of 15 days. |
| | | I am not required counseling beca | d to receive a briefing about credit use of: | | I am not required counseling beca | d to receive a briefing about credit ause of: |
| | | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for punseling with the court. | | about credit cour | are not required to receive a briefing seling, you must file a motion for ounseling with the court. |

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Mykelle Walker Signature of Debtor 1 Signature of Debtor 2 Executed on _ 3/16/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Mykelle | | Walker | Case number (if) | known) |
|--|---------------------------|-------------------------|---------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12, | or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § 34 | 42(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | | | | ules filed with the petition is incorrect. |
| attorney, you do not | _ | | | and mad man and policion to modifical |
| need to file this page. | /s/ Amy Gerstein | | Date | 3/16/2017 |
| . 0 | Signature of Attorney | for Dehtor | | M / DD / YYYY |
| | Signature of Attorney | or Bestor | | |
| | | | | |
| | Amy Gerstein | | | |
| | Printed name | | | |
| | | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 20 S. Clark Street | | | |
| | Street | | | |
| | 28th Floor | | | |
| | | | | |
| | Chicago | | Illinois | 60603 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3128374023 | Email address | agerstein@semradlaw.com |
| | | | | |
| | | | | |
| | Bar number | | State | |

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| Fill in this information to identify your case: | | | | |
|---|---------------------------|-------------|----------------------|--|
| Debtor 1 | Mykelle | | Walker | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

| П | Check if | this | is | an |
|---|----------|---------|----|----|
| | amende | d filir | ηg | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | · |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$3,890.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$3,890.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | , |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$64,681.21 |
| Your total liabilities | \$64,681.21 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,430.46 |
| 5. Schedule J: Your Expenses (Official Form 106J) | |
| o. constant of road Expenses (official form root) | \$2,230.00 |

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| Debt | tor 1 | Mykelle | | Walker | Case number (if known) | | | |
|---------------|---|---|------------------------------|--------------------------------|--|------------|--|--|
| Part 4 | 4. | First Name Answer These Question | Middle Name | Last Name | orde | | | |
| Part 4 | +. | Allswei These Question | is for Administrativ | ve and Statistical Nect | orus | | | |
| 6. A ı | re yo | ou filing for bankruptcy und | er Chapters 7, 11, or | 13? | | | | |
| | N | lo. You have nothing to report | on this part of the for | m. Check this box and subr | mit this form to the court with your other sch | edules. | | |
| | Y | es. | | | | | | |
| 7 W | hot | kind of debt do you have? | | | | | | |
| /. W | | • | | | | | | |
| Ŀ | | our debts are primarily con amily, or household purpose. | | | by an individual primarily for a personal, al purposes. 28 U.S.C. § 159. | | | |
| Г | γ | our debts are not primarily | consumer debts. You | u have nothing to report on | this part of the form. Check this box and sub | omit | | |
| | this form to the court with your other schedules. | | | | | | | |
| | | the Statement of Your Cur | | | onthly income from Official | \$1,106.28 | | |
| F | orm | 122A-1 Line 11; OR , Form 1 | 22B Line 11; OR , For | m 122C-1 Line 14. | | | | |
| 9. | Сор | by the following special cate | egories of claims fron | n Part 4, line 6 of Schedu | le E/F: | | | |
| | Fro | m Part 4 on Schedule E/F, o | copy the following: | | Total claim | | | |
| | 9a. | Domestic support obligations | (Copy line 6a.) | | \$0.00 | | | |
| | 9b. | Taxes and certain other debts | you owe the governm | nent. (Copy line 6b.) | \$0.00 | | | |
| | 9c. | Claims for death or personal in | njury while you were in | toxicated. (Copy line 6c.) | \$0.00 | | | |
| | 9d. | Student loans. (Copy line 6f.) | | | \$2,006.00 | <u>-</u> | | |
| | | Obligations arising out of a serity claims. (Copy line 6g.) | eparation agreement or | divorce that you did not rep | oort as \$0.00 | | | |
| | 9f. [| Debts to pension or profit-sha | ring plans, and other s | similar debts. (Copy line 6h.) | \$0.00 | | | |
| | | | | | | | | |

\$2,006.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information to identify your o | case: | - | | |
|--|--|--|---|--|---|
| | | | Mallan | | |
| Debtor 1 | Mykelle First Name | Middle Nam | Walker e Last Name | | |
| Debtor 2 (Spouse, if fi | ling) =: N | NAC I II N | | | |
| | - That Name | Middle Nam | | | |
| United Sta | ates Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case num | nber | | (-1.1.5) | | |
| | | | | | Check if this is an |
| Officia | al Form 106A/B | | | | amended filing |
| Sche | dule A/B: Prope | erty | | | 12/1 |
| category v responsibl write your | where you think it fits best. le for supplying correct info name and case number (if | Be as complete and rmation. If more spac known). Answer ever | an asset only once. If an asset fits in m accurate as possible. If two married po se is needed, attach a separate sheet y question. or Other Real Estate You Own or | eople are filing together, both a to this form. On the top of any a | re equally |
| | | | ny residence, building, land, or similar | | |
| | No. Go to Part 2 | quitable interest in a | my residence, building, land, or similar | property. | |
| | Yes. Where is the property? | | | | |
| | | w | /hat is the property? Check all that apply | Do not deduct secured | claims or exemptions. Put |
| 1.1 | Street address, if available, or | other description | Single-family home | , | red claims on Schedule D: ims Secured by Property. |
| | otreet address, if available, or | | Duplex or multi-unit building | Current value of the | Current value of the |
| | | | Condominium or cooperative Manufactured or mobile home | entire property? | portion you own? |
| | | } | Land | | |
| | Number Street | ř | Investment property | Describe the nature o interest (such as fee s | |
| | City State | Zip Code | Timeshare Other | the entireties, or a life | |
| | Oily State | . L | /ho has an interest in the property? Ch | Check if this is co | mmunity property |
| | | Ĺ | Debtor 1 only | Ш | |
| | | | Debtor 2 only | | |
| | | | Debtor 1 and Debtor 2 only | | |
| | | L | At least one of the debtors and another | | |
| | | | ther information you wish to add abou roperty identification number: | t this item, such as local | |
| If you | own or have more than one, | list here: | | | |
| 1.0 | | W. | that is the property? Check all that apply | | claims or exemptions. Put red claims on Schedule D: |
| 1.2 | Street address, if available, or | other description | Single-family home Duplex or multi-unit building | | ims Secured by Property. |
| | | | Condominium or cooperative | Current value of the | Current value of the |
| | | ř | Manufactured or mobile home | entire property? | portion you own? |
| | Number Street | | Land | Describe the nature o | f vour ownership |
| | | Ļ | Investment property Timeshare | interest (such as fee s | imple, tenancy by |
| | City State | Zip Code | Other | the entireties, or a life | e estate), ii known. |
| | | | ☑ /ho has an interest in the property? Ch ne. | Check if this is co | mmunity property |
| | | | Debtor 1 only | _ | |
| | | | Debtor 2 only | | |
| | | Ē | Debtor 1 and Debtor 2 only At least one of the debtors and another | | |
| | | L | _ | | |
| | | | ther information you wish to add abou roperty identification number: | t tins item, such as local | |

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| Single-family home | Debtor 1 | Mykelle | Walker | ase number (if known) |
|--|--|---|---|--|
| Single-family home | | First Name Middle Na | me Last Name | |
| Investment property | Stre | | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the Current value of the |
| Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only De | | | Investment property Timeshare | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |
| 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: Describe Your Vehicles | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | |
| Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No | | | · · · · | |
| Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Van | | | | |
| 3.1 Make Model: Year: Approximate mileage: Other information: 3.2 Make Model: Year: Approximate mileage: Other information: 3.3 Make Mho has an interest in the property? Check one. Creditors Who Have Claims Secured claims or exemption the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property? Current value of the entire property? Current value of the entire property? Who has an interest in the property? Check one. Year: Approximate mileage: Other information: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Current value of the amount of any secured claims or exemption the amount of any secured claims or exemption the amount of any secured claims or exemption one. Creditors Who Have Claims Secured by Property of the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property of the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do you ow you own th 3. Cars, va | rn, lease, or have legal or equitable int nat someone else drives. If you lease a ver ns, trucks, tractors, sport utility vehicles, n | nicle, also report it on Schedule G: Executory Co | |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Year: Approximate mileage: Other information: Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Current value of the entire property? Do not deduct secured claims or exemption the amount of any secured claims on Schucked the amount of any secured by Property? Current value of the entire property? Current value of the entire property? At least one of the debtors and another | ш | Make | one. | ? Check Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. |
| instructions) Who has an interest in the property? Check one. Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Do not deduct secured claims or exemptic the amount of any secured claims on Schrick Creditors Who Have Claims Secured by Property? Current value of the entire property? At least one of the debtors and another | | | Debtor 1 and Debtor 2 only | entire property? portion you own? |
| 3.2 Make Model: Year: Approximate mileage: Other information: Who has an interest in the property? Check one. Do not deduct secured claims or exemption the amount of any secured claims on Sch. Creditors Who Have Claims Secured by Property? Current value of the entire property? At least one of the debtors and another | | | | erty (see |
| Other information: Debtor 1 and Debtor 2 only At least one of the debtors and another Current value of the entire property? portion you own | 3.2 | Model: Year: | Who has an interest in the property one. | Property. Check Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. |
| Check if this is community property (see instructions) | | | Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community prop | entire property? portion you own? other |

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| | Mykelle First Name | Middle Name | Walker Last Name | Case numb | ei (ii kiiowii) | |
|------|--|-------------|--|---|--|--|
| 3.3 | Make Model: Year: | | Who has an interest in the one. Debtor 1 only | property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | • |
| | Approximate mileage: | | Debtor 2 only Debtor 1 and Debtor 2 or | ah. | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | | ¬ L | • | | |
| | | | At least one of the debtor | | | |
| | | | Check if this is communinstructions) | nity property (see | | |
| 3.4 | Make | | Who has an interest in the | property? Check | Do not deduct secured | |
| | Model: | | one. | | the amount of any secu | ired claims on <i>Schedule</i> aims Secured by Propert |
| | Year: Approximate mileage: | | Debtor 1 only | | Creditors Willo Have Cia | ums secured by Froperi |
| | Approximate mileage. | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 or | nly | entire property? | portion you own? |
| | | | At least one of the debtor | s and another | | · |
| | | | Check if this is communinstructions) | nity property (see | | |
| Exar | | • | er recreational vehicles, other t, fishing vessels, snowmobiles, i | • | | |
| Exar | nples: Boats, trailers, motors No Yes | • | | motorcycle accessor | Do not deduct secured the amount of any secu | ıred claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | t, fishing vessels, snowmobiles, Who has an interest in the | motorcycle accessor | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: | • | who has an interest in the one. | motorcycle accessor | Do not deduct secured the amount of any secu | ıred claims on <i>Schedule</i> |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | who has an interest in the one. Debtor 1 only | motorcycle accessor property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule aims Secured by Propert |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only | motorcycle accessor property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or | motorcycle accessor property? Check nly s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | rred claims on Schedule nims Secured by Propert Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) Who has an interest in the | property? Check hly s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule aims Secured by Propert Current value of the portion you own? claims or exemptions. F |
| 4.1 | Make Model: Other information: Make Model: Make Model: Make Model: Model: Model: Model: Model: Model: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) Who has an interest in the one. | property? Check hly s and another hity property (see | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property? Do not deduct secured the amount of any secu | claims or Schedule of the portion you own? |
| 4.1 | Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) Who has an interest in the one. Debtor 1 only | property? Check hly s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Control of the Secured Creditors Who Have Clate Creditors | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Fured claims on Schedule ims Secured by Propert |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor check if this is communinstructions) Who has an interest in the one. Debtor 1 only Debtor 2 only | property? Check hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | claims or exemptions. For exemptions of Schedule portion you own? claims or exemptions. For exemptions or Schedule prize of the portion you own? |
| 4.1 | Make Model: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | property? Check hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Control of the Secured Creditors Who Have Clate Creditors | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. Fured claims on Schedule ims Secured by Propert |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor check if this is communinstructions) Who has an interest in the one. Debtor 1 only Debtor 2 only | property? Check hly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule ims Secured by Propert Current value of the portion you own? claims or exemptions. For the portion of |

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Furniture & Goods \$575.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$350.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$700.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Misc. Jewelry \$250.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1875.00 for Part 3. Write that number here

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$15.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Fifth Third Bank \$1000.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: \$1000.00 Fifth Third Bank 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Deb ⁻ | tor 1 Mykelle | Middle Noves | Walker | Case number (if known) | |
|------------------|--|---|----------------------------|--|--|
| 20. | Negotiable instruments i | Middle Name orate bonds and other negotial nclude personal checks, cashiers' | checks, promissory no | otes, and money orders. | |
| | No Yes. Give specific information about | ents are those you cannot transfel | r to someone by signin | g or delivering them. | |
| | them | | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in IF | | , thrift savings account | ts, or other pension or profit-sharing plans | |
| | ✓ No Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | | | |
| | | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| 00 | 0 | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public | | | |
| | ✓ No | | Institution name: | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | r a periodic payment of money to | you, either for life or fo | or a number of years) | |
| | Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debt | or 1 Mykelle First Name | | Walker Case number (if known) | |
|------|---|---|--|--|
| 24. | | | Last Name ABLE program, or under a qualified state tuition program. | |
| | | 30(b)(1), 529A(b), and 529(b)(1). | | |
| | ✓ No Yes | Institution name and description. Separately file t | the records of any interests.11 U.S.C. § 521(c): | |
| | | | | |
| | | | | |
| 25. | Trusts, equita | ble or future interests in property (other than | n anything listed in line 1), and rights or powers | |
| | exercisable fo | | | |
| | ✓ No Yes. Descr | ibe | | |
| | | | | |
| 26. | | rights, trademarks, trade secrets, and other net domain names, websites, proceeds from roy | | |
| | √ No | | | |
| | Yes. Descr | ibe | | |
| | | | | |
| 27. | | chises, and other general intangibles ding permits, exclusive licenses, cooperative asso | ociation holdings, liquor licenses, professional licenses | |
| | ✓ No | | | |
| | Yes. Descr | ibe | | |
| | | | | |
| | | | | |
| Mor | ney or proper | ty owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or proper | | | portion you own? Do not deduct secured |
| | Tax refunds ow | red to you | Fadanak | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ow ✓ No — Yes. Give s about | red to you Decific information them, including whether | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ow No Yes. Give s about you a | red to you Decific information | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ow No Yes. Give s about you a and th | pecific information them, including whether ready filed the returns the tax years | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ow No Yes. Give s about you a and th | pecific information them, including whether ready filed the returns the tax years | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether ready filed the returns te tax years | State: Local: d support, maintenance, divorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether ready filed the returns the tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether ready filed the returns te tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether ready filed the returns the tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether ready filed the returns the tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow ✓ No ☐ Yes. Give s about you a and the support Examples: Past ✓ No ☐ Yes. Give s | pecific information them, including whether ready filed the returns le tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether ready filed the returns the tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| 28. | Tax refunds ow No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether ready filed the returns he tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| 28. | Tax refunds ow ✓ No Yes. Give s about you a and th Family support Examples: Past ✓ No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether ready filed the returns he tax years | State: Local: d support, maintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |

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| Deb ⁻ | tor 1 Mykelle | | Walker | Case number (if known) | |
|------------------|---|---------------------------|---|--|--|
| | First Name | Middle Nam | e Last Name | | |
| 31. | Interests in insurance po Examples: Health, disabilit | | ealth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | No Yes. Name the insural of each policy and list | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property If you are the beneficiary of property because someon No | of a living trust, expect | n someone who has died proceeds from a life insurance police | y, or are currently entitled to receive | |
| | Yes. Describe | | | | |
| 33. | | | you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| | ✓ No Yes. Describe | | | | |
| 34. | Other contingent and unto set off claims | nliquidated claims o | f every nature, including counterd | claims of the debtor and rights | |
| | No Yes. Describe | | | | |
| 35. | Any financial assets you | did not already list | | | |
| | Yes. Describe | | | | |
| 36. | | - | m Part 4, including any entries fo | | \$2015.00 |
| Part | 5: Describe Any Bus | iness-Related Pr | operty You Own or Have an Ir | nterest In. List any real estate in Par | t 1. |
| 37. | Do you own or have any | legal or equitable in | nterest in any business-related pr | operty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | F | Current value of the cortion you own? On not deduct secured claims or exemptions |
| 38. | Accounts receivable or | commissions you al | ready earned | | |
| | Yes. Describe | | | | |
| 39. | Office equipment, furnis Examples: Business-relate | | e, modems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, elec | tronic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

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| Debt | tor 1 Mykelle | | | Case number (if known) | | |
|-------|-----------------------------|--|-----------------------------------|----------------------------|---|----------|
| | First Name | Middle Name | Last Name | | | |
| 40. | Machinery, fixtures, equ | ipment, supplies you use in bus | iness, and tools of your trade | | | |
| | ✓ No | | | | | |
| | Yes. Describe | | | | | |
| | | | | | | |
| 41. | Inventory | | | | | |
| | - N | | | | | |
| | Yes. Describe | | | | | |
| | Tes. Describe | | | | | |
| | | | | | | |
| 42. | Interests in partnerships | or joint ventures | | | | |
| | ✓ No | | | | | |
| | Yes. Give specific | Name of e | ntity: | % of ownership: | | |
| | information about | | | | _ | |
| | them | | | | | |
| | | | | | | |
| 40.4 | | | | | | |
| 43. | Justomer lists, mailing lis | sts, or other compilations | | | | |
| | ✓ No | | | | | |
| | Yes. Do your lists incl | ude personally identifiable informat | tion (as defined in 11 U.S.C. § 1 | 01(41A))? | | |
| | ☐ No | | | | | |
| | Yes. Describe | e | | | | |
| | | | | | | |
| 44. | Any business-related pro | operty you did not already list | | | | |
| | ✓ No | | | | | |
| | Yes. Give specific | | | | | |
| | information | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | of your entries from Part 5, incl | | u have attached | | |
| or Pa | art 5. Write that number i | here | | | | |
| Part | | m- and Commercial Fishing | -Related Property You Ov | vn or Have an Interest In. | | |
| | If you own or have an in | terest in farmland, list it in Part 1. | | | | |
| 46. | Do you own or have any | legal or equitable interest in ar | ny farm- or commercial fishing | g-related property? | | |
| | No. Go to Part 7. | | | | Current value of the | |
| | Yes. Go to line 47. | | | | portion you own? Do not deduct secured | d claims |
| | | | | | or exemptions | |
| 47. | Farm animals | | | | | |
| | Examples: Livestock, pou | itry, farm-raised fish | | | | |
| | ✓ No | | | | | |
| | Yes. Describe | | | | | |
| | | | | | | |

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| Debt | tor 1 | Mykelle First Name | Middle Name | Walker Last Name | Case number (if known) | |
|--------------|----------|-----------------------|---|--------------------------|--------------------------------------|-------------|
| 48. | Cro | ps-either growing | or harvested | | | |
| | ✓ | No Yes. Describe | | | | |
| 49. | Far | m and fishing equip | oment, implements, machinery, fixto | ures, and tools of trade | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| 50. | Far | m and fishing supp | lies, chemicals, and feed | | | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| 51. | Any | / farm- and comme | rcial fishing-related property you di | d not already list | | _ |
| | J | No | | | | |
| | | Yes. Describe | | | | |
| | | L. | | | | |
| | | | ll of your entries from Part 6, includ | | s you have attached | |
| | | | | | | |
| | | | | | | |
| Part | 7: | Describe All Pro | perty You Own or Have an Inte | rest in That You Did | Not List Above | |
| 53. | | | perty of any kind you did not already s, country club membership | y list? | | |
| | ✓ | No | ., , | | | |
| | П | Yes. Give specific | | | | |
| | | information | | | | |
| | | | | | | |
| 54. A | dd tl | ne dollar value of a | I of your entries from Part 7. Write | that number here | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | Listabo Totolo e | i Faala Dawl of this Farms | | | |
| Part | 8: | LIST THE TOTALS OF | Each Part of this Form | | | |
| 55. I | Part | 1: Total real estate | , line 2 | | | · |
| 1 | | 2 total vehicles, lin | | | _ | |
| | | • | nd household items, line 15 | \$1875.00 | _ | |
| | | 4: Total financial as | | \$2015.00 | _ | |
| | | | elated property, line 45 | | _ | |
| | | | fishing-related property, line 52 | | _ | |
| | | | erty not listed, line 54 | | | |
| 62.1 | Γotal | personal property | Add lines 56 through 61 | \$3890.00 | Copy personal property tota | + \$3890.00 |
| | | | | | representation of the company to the | |
| 63. T | otal | of all property on S | Schedule A/B. Add line 55 + line 62 | | | \$3890.00 |

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| Debtor 1 | Mykelle | | Walker |
|---------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number | | | |
| (If known) | | | |
| Official | Form 106C | | |
| Official | FOIIII 100C | | |
| | | | |

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Part 1: Identify the Property You Claim as Exempt | | | | | | |
|----|---|---|---|------------------------------------|--|--|--|
| 1. | . Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | | |
| | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | |
| 2. | For any property you list on Schedule A | N/B that you claim as e | exempt, fill in the information below. | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief | Schedule A/B | | 735 ILCS 5/12-1001(b) | | | |
| | description: Checking account, Fifth Third Bank | \$1,000.00 | \$1,000.00 100% of fair market value, up to any | | | | |
| | Line from Schedule A/B: 17 | | applicable statutory limit | | | | |
| | Brief description: Savings account, Fifth Third Bank Line from Schedule A/B: 17 | \$1,000.00 | \$1,000.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | | |

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Debtor 1 Mykelle Walker Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$575.00 description: **✓** \$575.00 Misc. Household 100% of fair market value, up to any **Furniture & Goods** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(a) Brief \$700.00 description: **V** \$700.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$350.00 description: **✓** \$350.00 Misc. Electronics 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) \$250.00 description: **✓** \$250.00 Misc. Jewelry

100% of fair market value, up to any

100% of fair market value, up to any

\$15.00

applicable statutory limit

applicable statutory limit

Line from

Brief

Schedule A/B:

description:

Line from

Schedule A/B:

Cash on Hand

12

16

\$15.00

735 ILCS 5/12-1001(b)

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| | | _ | | | | |
|---------------------------|----------------------------------|-------------------------------|--|---|--|------------------------------------|
| Fill in this info | ormation to identify your ca | ase: | | | | |
| Debtor 1 | Mykelle | | Walker | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case number (If known) | r | | | | | |
| Official | Form 106D | | | J | | Check if this is an amended filing |
| Sched | ule D: Credit | ors Who Ha | ve Claims Secure | ed by Prop | erty | 12/15 |
| more space i | | | e are filing together, both are equ nber the entries, and attach it to t | | | |
| 1. Do any | creditors have claims s | ecured by your proper | ty? | | | |
| ✓ No. | . Check this box and subn | nit this form to the court v | with your other schedules. You have | e nothing else to repo | ort on this form. | |
| Yes | s. Fill in all of the informatio | n below. | | | | |
| Part 1: Lis | t All Secured Claims | | | | | |
| for each | | ditor has a particular claim, | red claim, list the creditor separately list the other creditors in Part 2. As g to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports | Column C Unsecured portion If any |

this claim

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| Debtor 1 Mykelle Walker First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with Partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number |
|--|
| First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured |
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| (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northem District of Illinois Case number (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured |
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| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured |
| other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured |
| the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims |
| 1. Do any creditors have priority unsecured claims against you? |
| No. Go to Part 2. |
| Yes. |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. |
| As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) |

claim

amount

amount

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Check into Cash \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name 702 E Rollins Rd When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60073 Round Lk Bch Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? Yes 4.2 Check N Go \$6,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO BOX 566027 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 75356 Dallas Texas Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Payday Loan Is the claim subject to offset? **✓** No Yes 4.3 Chen, Jun \$3,724.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 400 Kenwood Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60073 Round Lake Illinois City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Judgment Case #14-LM-75 Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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 Debtor 1 First Name
 Mykelle
 Walker
 Case number (if known)

 Last Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | n Page | |
|--------|--|--|-------------|
| | After listing any entries on this page, number them beginning wi | ith 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | City of Chicago Parking Nonpriority Creditor's Name 121 N. LaSalle St # 107A Number Street | Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent | \$4,728.29 |
| | Chicago Illinois 60602 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Parking Tickets & Red Light Other. Specify | |
| 4.5 | Credit Collection Services Commercial Nonpriority Creditor's Name 725 Canton Street Number Street Norwood Massachusetts 02062 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Heat 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collecting For - Allstate Insurance Company | \$8,531.92 |
| 4.6 | Honor Finance Nonpriority Creditor's Name 1731 CENTRAL ST Number Street EVANSTON Illinois 60201 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Hen was the debt incurred? 5/2013 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Ford Expediation | \$9,810.00 |

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 Debtor 1 First Name
 Mykelle
 Walker
 Case number (if known)

 Last Name
 Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | on Page | |
|--------|---|---|-------------|
| | After listing any entries on this page, number them beginning v | with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | I C SYSTEM INC Nonpriority Creditor's Name PO BOX 64378 Number Street | Last 4 digits of account number 3001 When was the debt incurred? 9/2015 As of the date you file, the claim is: Check all that apply. Contingent | \$1,204.00 |
| | SAINT PAUL Minnesota 55164 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Collecting For - ComEd | |
| 4.8 | I C SYSTEM INC Nonpriority Creditor's Name PO BOX 64378 Number Street SAINT PAUL Minnesota 55164 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number 8001 When was the debt incurred? 5/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting For - AT&T | \$347.00 |
| 4.9 | IDES-Benefit Payment Control Division Nonpriority Creditor's Name 28542 Network Pl Number Street Chicago Illinois 60673 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number 1269 When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Over Payment of Benefits | \$2,989.00 |

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Illinois Tollway \$5,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Ave Number As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated 60515 Downers Grove Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ **Tollway Violations** Is the claim subject to offset? **✓** No Yes Lake County Housing Authority \$8,000.00 4.11 Last 4 digits of account number _ Nonpriority Creditor's Name n/a 33928 US-45 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Grayslake Illinois 60030 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes Municipal Collection Services, Inc. 4.12 \$250.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 327 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60463 Palos Heights Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify Collecting For - Village of Hillside

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Debtor 1 Mykelle Walker Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

| Part 2: | 2: Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | | | | |
|---------|---|---|---|--|-------------|--|--|--|--|
| | After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. | | | | | | | | |
| 4.13 | PENN CREDIT | I | ast 4 digits of account number | 5166 | \$200.00 | | | | |
| | Nonpriority Creditor's Name 916 S 14TH ST | 1 | When was the debt incurred? | 4/2012 | | | | | |
| | Number Street | | s of the date you file, the claim | is: Check all that apply | | | | | |
| | PO Box 988 | í | Contingent | 13. Officer all trial apply. | | | | | |
| | | [| Unliquidated | | | | | | |
| | Harrisburg Pennsylvania City State | 17104 Zip Code | Disputed | | | | | | |
| | Who incurred the debt? Check one. | | ☑ Disputed Type of NONPRIORITY unsecure | d claim: | | | | | |
| | Debtor 1 only | ľ | Student loans | u Ciaiiii. | | | | | |
| | Debtor 2 only | l T | = | acration agreement or | | | | | |
| | Debtor 1 and Debtor 2 only | L | Obligations arising out of a sep divorce that you did not report | | | | | | |
| | At least one of the debtors and another | [| Debts to pension or profit-shar debts | ing plans, and other similar | | | | | |
| | Check if this claim relates to a commun | ity debt | | - Village of South | | | | | |
| | Is the claim subject to offset? | | Other. Specify Ho | lland | | | | | |
| | No | | | | | | | | |
| | Yes | | | | | | | | |
| 4.14 | Santander Consumer USA | ι | ast 4 digits of account number | 1000 | \$10,161.00 | | | | |
| | Nonpriority Creditor's Name 14101 MYFORD RD FL 2 | \ | When was the debt incurred? | | | | | | |
| | Number Street | 1 | s of the date you file, the claim | is: Check all that apply | | | | | |
| | | i | Contingent | ioi onosit all that apply. | | | | | |
| | THOTIN | | Unliquidated | | | | | | |
| | TUSTIN California City State | 92780 Zip Code | Disputed | | | | | | |
| | Who incurred the debt? Check one. | | □ □ □ □ □ □ □ | d claim: | | | | | |
| | Debtor 1 only | ľ | Student loans | d Claim. | | | | | |
| | Debtor 2 only | l T | = | acration agreement or | | | | | |
| | Debtor 1 and Debtor 2 only | L | Obligations arising out of a sep divorce that you did not report | | | | | | |
| | At least one of the debtors and another | [| Debts to pension or profit-shar | ing plans, and other similar | | | | | |
| | Check if this claim relates to a commun | ity debt | | azda CX-7 | | | | | |
| | Is the claim subject to offset? | ı | V | | | | | | |
| | ✓ No | | | | | | | | |
| | Yes | | | | | | | | |
| 4.15 | Sprint | | 4 | | \$230.00 | | | | |
| | Nonpriority Creditor's Name | | • | | | | | | |
| | | | vnen was the debt incurred? | 11/a | | | | | |
| | | <i>I</i> | s of the date you file, the claim | is: Check all that apply. | | | | | |
| | | | = | | | | | | |
| | Overland Park Kansas | 66251 | Unliquidated | | | | | | |
| | City State | Zip Code | Disputed | | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | | ype of NONPRIORITY unsecure | d claim: | | | | | |
| | | | Student loans | | | | | | |
| | 브 | [| Obligations arising out of a sep | | | | | | |
| | <u></u> | г | divorce that you did not report as priority claims | | | | | | |
| | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | | | ✓ Other. Specify Cell Pl | | | | | | |
| | Is the claim subject to offset? No | | | | | | | | |
| | Yes | | | | | | | | |
| 4.15 | Check if this claim relates to a communits the claim subject to offset? No Yes Sprint Nonpriority Creditor's Name 6391 Sprint Number Street Overland Park Kansas City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a communits the claim subject to offset? No | 66251 [] [] [] [] [] [] [] [] [] [| debts Other. Specify 2011 M ast 4 digits of account number When was the debt incurred? as of the date you file, the claim Contingent Unliquidated Disputed ype of NONPRIORITY unsecure Student loans Obligations arising out of a seg divorce that you did not report Debts to pension or profit-shard debts Other Consider. | n/a is: Check all that apply. d claim: paration agreement or as priority claims | \$230.00 | | | | |

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 U S DEPT OF ED/GSL/ATL \$763.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 9/2010 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30301 **ATLANTA** Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL \$592.00 4.17 2964 Last 4 digits of account number __ Nonpriority Creditor's Name 7/2010 PO BOX 2287 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ATLANTA Georgia 30301 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.18 \$372.00 Last 4 digits of account number 3447 Nonpriority Creditor's Name 9/2010 When was the debt incurred? PO BOX 2287 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ATLANTA 30301 Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt

✓ No Yes

Is the claim subject to offset?

Other. Specify

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Debtor 1 Mykelle Walker __ Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 U S DEPT OF ED/GSL/ATL \$279.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 7/2010 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 30301 ATLANTA Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only ✓ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes

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Debtor 1 Mykelle Walker Case number (if known)
First Name Middle Name Last Name

| Commonwealth Ed | dison | | | | | | | |
|--|-------------------|-------------------|--|---|---|--|--|--|
| Name | uisoii | | On which entry in | Part 1 or Part | 2 did you list the original creditor? | | | |
| ATTN: Bankruptov | Donartmont: 2100 |) Swift Drivo | Line 4.7 | of (Check | Dort 1. Creditors with Priority Unaccured Claims | | | |
| ATTN: Bankruptcy Department: 2100 Swift Drive Number Street | | | one): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Oak Brook | Illinois | 60523 | Last 4 digits of ac | count number | 3001 | | | |
| City | State | Zip Code | | | | | | |
| AT&T | | | — 0 | . Dani d Dani | O did list the evicinal sunditor | | | |
| Name | | | On which entry in | 1 Part 1 or Part | 2 did you list the original creditor? | | | |
| PO Box 537104 | | | Line 4.8 | of (Check | Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Atlanta | Georgia | 30353 | Last 4 digits of ac | count number | 8001 | | | |
| City | State | Zip Code | | | | | | |
| Village of South Ho | olland | | On which ontry in | - On which cates in Boat 4 or Boat 0 did you list the entrined and discon | | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | |
| 16226 Wausau Av | enue | | Line 4.13 | of (Check | Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | <u></u> | one): | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| South Holland City | Illinois State | 60473 Zip Code | Last 4 digits of ac | count number | 5166 | | | |
| Harris & Harris LTD | | Zip Gode | | | | | | |
| Name | , | | On which entry in | Part 1 or Part | 2 did you list the original creditor? | | | |
| 111 West Jackson | Boulevard Suite 4 | 00 | Line 4.4 | of (Check | Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | Boulevard Guite 4 | 00 | | one): | | | | |
| | | | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Chicago | Illinois | 60604 | Last 4 digits of ac | count number | | | | |
| City | State | Zip Code | Lust + digits of ac | Joourn mamber | | | | |
| Allstate Insurance (| Company | | | | O Para Para Para Para Para Para Para Par | | | |
| Name | | | On which entry in | 1 Part 1 or Part | 2 did you list the original creditor? | | | |
| 2775 Sanders Roa | ad | | Line 4.5 | _of (Check | Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | <u></u> | one): | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Northbrook | Illinois | 60062 | Last 4 digits of ac | count number | | | | |
| City | State | Zip Code | | | | | | |
| Village of Hillside P | arking | | On which entry in | Dart 1 or Dart | 2 did you list the original creditor? | | | |
| Name | | | On which entry in | irait i Ui Fall | 2 did you list the original creditor: | | | |
| 425 Hillside Avenu | е | | Line 4.12 | _of (Check | Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | | one): | Part 2: Creditors with Nonpriority Unsecured | | | |
| LPU-14. | 102 - 2 | 00400 | | | Claims | | | |
| Hillside | Illinois | 60162 | Last 4 digits of ac | count number | | | | |
| City | State | Zip Code | | | | | | |

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Debtor 1 Mykelle Walker Case number (if known)
First Name Middle Name Last Name

| FIISLING | ine Middle Name Last Name | | | |
|--------------------------|---|---------|----------------------|-------|
| Part 4: Add t | he Amounts for Each Type of Unsecured Claim | | | |
| | amounts of certain types of unsecured claims. This information is mounts for each type of unsecured claim. | s for s | tatistical reporting | purpo |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. 6e. Total. Add lines 6a through 6d. | | \$0.00 | |
| | | 6e. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$2,006.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$62,675.21 | |
| | 6i Total Add lines 6f through 6i | 6i | \$64,681.21 | |

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| Fill in this information to identify your case: | | | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|--|--|
| Debtor 1 | Mykelle | Walker | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | | |
| Debtor 2 | | | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | | | | | | |
| Case number (If known) | , | | (State) | | | | | | |

Official Form 106G

| | Check if this is an |
|---|---------------------|
| _ | amended filing |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or compar | ny with whom you have | the contract or lease | State what the contract or lease is for |
|-----------------------------|-----------------------|-----------------------|--|
| Jan-Pro of Northern Name | n Illinois | | Other, Debtor is Owner, Franchise Contract |
| 136 Shore Drive Number | Street | | Franchise Contract |
| Willowbrook City | Illinois State | 60527 Zip Code | |

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| | | | D0 | cument ragi | gc 54 01 71 |
|-----------------|---|-------------------------------|--------------------------------|---------------------------|--|
| Fill in | this infor | mation to identify your c | ase: | | |
| Debto | or 1 | Mykelle | | Walker | |
| Dabte | 0 | First Name | Middle Name | Last Name | |
| Debto (Spous | or 2 se, if filing) | First Name | Middle Name | Last Name | |
| Unite | d States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case | number | | | (State) | |
| (If knov | | | | | |
| | | | | | Check if this is a amended filing |
| Off | icial | Form 106H | | | anended hing |
| <u>OII</u> | ICIAI | 1 01111 10011 | | | |
| Sch | redul | e H: Your Cod | lebtors | | 12/1 |
| 1. [[| n). Answe Do you ha ✓ No ─ Yes | r every question. | ou are filing a joint case, do | not list either spouse as | |
| | daho, Lou | uisiana, Nevada, New Mex | kico, Puerto Rico, Texas, W | | ry? (Community property states and territories include Arizona, California, nsin.) |
| Ŀ | | Go to line 3. | er spouse, or legal equiva | lant live with you at the | time? |
| L | | Dia your spouse, iornie No | er spouse, or legal equiva | ient live with you at the | le une? |
| | | - | y state or territory did you | ı live? | Fill in the name and current address of that person. |
| | | | | | |
| | | Name of your spouse, f | ormer spouse, or legal equ | ivalent | |
| | | Number Street | | | |
| | | City | State | Zip Co | Code |
| 3. I | n Columr | ı 1, list all of your codel | otors. Do not include vou | r spouse as a codebtor | or if your spouse is filing with you. List the person shown in line 2 |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | _ | | | | | |
|--|--|--|---|-----------------|--------------|--------------------------|--------------------------|
| Fill in this | s information to identify | your case: | | | | | |
| Debtor 1 | Mykelle | | Walker | | | | |
| | First Name | Middle Name | Last Na | ame | — Che | eck if this is: | |
| Debtor 2 | filing) First Name | Middle Name | Loot Ma | ama | _ | An amended filing | |
| | | Middle Name | Last Na | | | · · | post-petition chapter 13 |
| United States | ates Bankruptcy Court for | Northern | District of Illin | | | expenses as of the follo | |
| Case num | ber | | (5 | tate) | | | |
| (If known) | - | | | | | MM / DD / YYYY | |
| Officia | al Form 106I | | | | | | |
| Sched | dule I: Your In | come | | | | | 12/15 |
| information spouse. If number (i | on about your spouse. I | | d your spous | e is not filing | with you, do | not include informat | tion about your |
| 1. Fill in | your employment | | Debtor 1 | | | Debtor 2 | |
| inform | nation. | Formula and adultura | | | | | |
| | have more than one job, | Employment status | Employ | - | | Employed | |
| | a separate page with ation about additional | | Not Employed Sole proprietorship Mary L LLC 656 E. 156th Place | | | Not Employed | |
| emplo | yers. | Occupation | | | | _ | |
| | e part time, seasonal, or | Employer's name | | | | | |
| | nployed work. | Employer's address | | | | - | |
| | pation may include student nemaker, if it applies. | | Number Str | Number Street | | Number Street | |
| | | | | | | | |
| | | | South Holland | Illinois | 60473 | | |
| | | | City | State | Zip Code | _ City | State Zip Code |
| | | How long employed there? | 5 months | | | | |
| | | there: | - | | | | - |
| Part 2: | Give Details About N | Monthly Income | | | | | |
| spouse u | ınless you are separated. | the date you file this form e more than one employer, et to this form. | - | information for | | · | |
| | | ary, and commissions (before, calculate what the monthly | | 2. | \$0.00 | non-ming spouse | _ |
| 3. Esti | mate and list monthly ove | rtime pay. | | 3. | + \$0.00 | | <u> </u> |
| 4. Calc | culate gross income. Add li | ine 2 + line 3. | | 4. | \$0.00 | | |
| | | | | | | - | |

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| Debt | or 1Mykelle First Name | Mykelle Walker First Name Middle Name Last Name | | Case number (if Known) | | | |
|----------------------|---|---|-----------------|---------------------------|-----------------------------------|-------------------|----------------|
| | THOUTHAM | Wilder Harrie | act Hamo | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Co | py line 4 here | | → 4. | \$0.00 | | • | |
| 5. Lis | t all payroll deductions: | | | | | | |
| 5a | . Tax, Medicare, and Social Sec | curity deductions | 5a. | \$0.00 | | | |
| 5b | . Mandatory contributions for r | etirement plans | 5b. | \$0.00 | | | |
| 5с | . Voluntary contributions for re | tirement plans | 5c. | \$0.00 | | | |
| 5d | . Required repayments of retire | ement fund loans | 5d. | \$0.00 | | | |
| 5e | . Insurance | | 5e. | \$0.00 | | | |
| 5f. | Domestic support obligations | | 5f. | \$0.00 | | | |
| 5g | . Union dues | | 5g. | \$0.00 | | | |
| 5h | . Other deductions. Specify: | | 5h. | + \$0.00 + | | | |
| 6. Ad +5h. | d the payroll deductions. Add li | nes 5a + 5b + 5c + 5d + 5e +5f | + 5g 6. | \$0.00 | | | |
| 7. Ca | Iculate total monthly take-hom | e pay. Subtract line 6 from line | 4. 7. | \$0.00 | | | |
| 8. Lis | t all other income regularly rec | ceived: | | | | | |
| 8a | Net income from rental prope business, profession, or farm | rty and from operating a | | | | | |
| | Attach a statement for each prop gross receipts, ordinary and nec | | | 0745 40 | | | |
| 01- | the total monthly net income. | | 8a. | \$715.46 | | | |
| | . Interest and dividends | er. | 8b. | \$0.00 | | | |
| 80 | E. Family support payments that dependent regularly receive | | | | | | |
| | Include alimony, spousal suppo divorce settlement, and property | | 8c. | \$363.00 | | | |
| 8d | I. Unemployment compensation | 1 | 8d. | \$0.00 | | | |
| 8e | . Social Security | | 8e. | \$0.00 | | | |
| 8f. | Other government assistance Include cash assistance and the cash assistance that you receive, under the Supplemental Nutrition housing subsidies Specify: Food Assistance Programs Inco | value (if known) of any non- such as food stamps (benefits a Assistance Program) or | 8f. | \$693.00 | | | |
| 80 | Pension or retirement income | | 8g. | \$0.00 | | | |
| | . Other monthly income. Specif | | 8h. | | | | |
| | d all other income Add lines 8a | | | \$2,430.46 | | 1 | |
| 0.710 | a an other modilio / ida iii/oo da | 7 05 7 00 7 00 7 00 7 01 7 0g 7 9 | o | ΨΣ,400.40 | | | |
| | alculate monthly income. Add lind the entries in line 10 for Debtor | | 10. ouse | \$2,430.46 | | = | \$2,430.46 |
| In o | tate all other regular contributiclude contributions from an unma ends or relatives. | arried partner, members of your h | ousehold, yo | ur dependents, your roomi | | | |
| | pecify: | | | , , , | | 11. + | \$0.00 |
| _ | | | | | | | |
| | dd the amount in the last colur rite that amount on the Summary | | | | | 12. | \$2,430.46 |
| | | | | | | Combin monthly | ed / income |
| 13. D | o you expect an increase or de | crease within the year after yo | ou file this fo | rm? | | | |
| - | No. | | | | | | |
| Г | Yes. Explain: | | | | | | |
| _ | _ | | | | | | |

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| Debtor 1Mykelle | | Walke | er | | Case number (if | | |
|---|------------------|--------------|--------------|--------------|-----------------|--|---|
| First Name | Middle Name | Last I | Name | | known) | | |
| Official Form 106I. Additiona | ıl page. | | | | | | |
| 8a.Net income from rental property and | from operating a | business, pr | ofession, or | farm | | | |
| 8a.1 Mary L LLC | | Debtor 1 | Debtor 2 | | | | |
| Gross receipts (before all deductions) | | \$1,520.00 | | | | | |
| Ordinary and necessary operating expen- | ses | -\$804.54 | | | | | |
| Net monthly income from a business, pr | ofession, or | \$715.46 | | Copy here | \$715.46 | | _ |

farm

Official Form 106I Schedule I: Your Income page 3

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| Fill in this infor | mation to identify yo | ur case: | | | |
|------------------------------------|--|--|---|----------------------|---|
| Debtor 1 | Mykelle First Name | Middle Name | Walker Last Name | Check if this is: | |
| Debtor 2 | = | | | An amended filir | າດ |
| (Spouse, if filing) | First Name | Middle Name | Last Name | 브 | |
| | sankruptcy Court for t | he: Northern [| District of Illinois (State) | | howing post-petition chapter 13 the following date: |
| Case number (If known) | | | | MM / DD / YYYY | |
| Official | Form 106 | 1 | | | |
| | | _ | | | |
| Schedul | e J: Your Ex | kpenses | | | 12/15 |
| information. If | | | re filing together, both are equall form. On the top of any additiona | | |
| Part 1: Des | cribe Your House | hold | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. De | oes Debtor 2 live in | a separate household? | | | |
| | No | | | | |
| | Yes. Debtor 2 mus | st file Official Forms 106J-2, Expen | ses for Separate Household of Debt | or 2. | |
| 2. Do you hav | e dependents? | No | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | | | Child | 18 years | No. |
| | | | 0 | 10 | Yes. No. |
| | | | Child | 16 years | Yes. |
| | | | Child | 12 years | No. |
| | | | Child | 4 voore | Yes. No. |
| | | | Child | 4 years | Yes. |
| | enses include f people other | No | | | |
| than yourself and dependents | | Yes | | | |
| Part 2: Esti | nate Your Ongoi | ng Monthly Expenses | | | |
| | _ | | ou are using this form as a suppl | ement in a Chanter 1 | 3 case to report |
| | of a date after the ba | | plemental Schedule J, check the | | |
| | | on-cash government assistance i ed it on Sc <i>hedule I: Your Incom</i> e | | | Your expenses |
| | or home ownership or the ground or lot. 4 | • | clude first mortgage payments and | | \$1,000.00 |
| If not incl | uded in line 4: | | | | |
| 4a. Real es | state taxes | | | | 4a \$0.00 |
| 4b. Proper | ty, homeowner's, or | renter's insurance | | | 4b. \$0.00 |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Mykelle Walker Case number (if known)
First Name Middle Name Last Name

| | riistivanie | Middle Name Last Name | | |
|--|------------------------------------|---|-----|---------------|
| | | | | Your expenses |
| 6a. Electricity, heat, natural gas 6a. \$120.00 6b. Watter, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$65.00 6d. Other. Specify: 6d. \$50.00 7. Food and housekeeping supplies 7. \$705.00 8. Childcare and children's education costs 8. \$0.00 9. Ciothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 11. \$0.00 11. Medical and dental expenses 11. \$0.00 11. Medical and dental expenses 11. \$0.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$250.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Install insurance 15. \$0.00 15b. Health insurance 15. \$0.00 15c. Vahicle Insurance 15c. \$0.00 15c. Vahicle Insurance | 5. Additional mortgage paymer | ts for your residence, such as home equity loans | 5. | \$0.00 |
| 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, call phone, Internet, satellite, and cable services 6c. \$55.00 6d. Other. Specify: 7. \$705.00 7. Food and housekeeping supplies 7. \$705.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$50.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$250.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15c. Vehicle insurance 15a. \$0.00 15c. Vehicle insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in line | 6. Utilities: | | | |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: 6d. Other. Specify: 7. Food and housekeeping supplies 8. \$0.00 7. Food and housekeeping supplies 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$55.00 10. Personal care products and services 10. \$55.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 0 Do not include care payments 12. \$250.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Leath insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance. 15c. Vehicle insurance specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance spaments 17a. Care payments for Vehicle 1 17b. Care payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17 | 6a. Electricity, heat, natural gas | | 6a. | \$120.00 |
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| Do not include car payments 13. 13. 13. 13. 13. 13. 14. | 11. Medical and dental expens | es | 11. | \$0.00 |
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| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: 15d \$0.00 15d. Other insurance. Specify: 16 \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16 \$0.00 17. Installment or lease payments: 17a \$0.00 17b. Car payments for Vehicle 1 17a \$0.00 17c. Other. Specify: 17b \$0.00 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 14. Charitable contributions an | d religious donations | 14. | \$0.00 |
| 15b | | cted from your pay or included in lines 4 or 20. | | |
| 15c. Vehicle insurance | 15a. Life insurance | | 15a | \$0.00 |
| 15d. Other insurance. Specify: | 15b. Health insurance | | 15b | \$0.00 |
| Specify: | | | 15c | \$0.00 |
| Specify: | 15d. Other insurance. Specify: | | 15d | \$0.00 |
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| 17c. Other. Specify: | 17a. Car payments for Vehicle | 1 | 17a | \$0.00 |
| 17d. Other. Specify: | 17b. Car payments for Vehicle | 2 | 17b | \$0.00 |
| 17d. Other. Specify: | 17c. Other. Specify: | | 17c | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | 17d | \$0.00 |
| 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | | \$0.00 |
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| 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | , , , , | | 20a | \$0.00 |
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| 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 20c. Property, homeowner's, | or renter's insurance | | |
| | 20d. Maintenance, repair, and | upkeep expenses. | | |
| | 20e. Homeowner's association | or condominium dues | 20e | \$0.00 |

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| Debtor 1 Myke | | | Walker | Case number (if known) | | |
|-----------------------|--------------------------|-------------------------|------------------------------|------------------------|--------|------------|
| First N | lame | Middle Name | Last Name | | | |
| 21. Other. Spe | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expenses | S. | | | | \$2,230.00 |
| | nes 4 through 21. | | | | \$0.00 | |
| , , | ` , , | ,, ,, | from Official Form 106J-2 | | | \$2,230.00 |
| 22c. Add lir | ne 22a and 22b. The resu | ult is your monthly exp | enses. | | 22. | |
| 23. Calculate | your monthly net incon | ne. | | | | |
| 23a. Copy | ine 12 (your combined n | monthly income) from S | Schedule I. | | 23a | \$2,430.46 |
| 23b. Copy | your monthly expenses f | from line 22 above. | | | 23b | \$2,230.00 |
| | ct your monthly expense | | icome. | | | \$200.46 |
| The re | sult is your monthly net | income. | | | 23c | |
| | | | pan within the year or do yo | | | |

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| Fill in this infor | mation to identify your c | ase: | | |
|------------------------|---------------------------|-------------|----------------------|--|
| Debtor 1 | Mykelle | | Walker | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number (If known) | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Mykelle Walker | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 3/16/2017 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| Fill in t | this info | mation to ic | dentify your o | case: | | | | | | |
|------------------|-------------------------|------------------|---------------------------------------|---------------------|-----------|----------------------|-------------------|---------------|------------------|---|
| Debto | r 1 | Mykelle | | | | Walker | | | | |
| | | First Name | е | Middle | Name | Last Nam | e | | | |
| Debto (Spouse | r 2 e, if filing) | First Name | e | Middle | Name | Last Nam | <u> </u> | | | |
| United | l States I | | Court for the: | | | District of Illino | | | | |
| | | - aaptoy 1 | , , , , , , , , , , , , , , , , , , , | 101010 | | (Stat | | | | |
| Case r | number ^{m)} | | | | | | | | | |
| Offi | cial | Form | 107 | | | | | _ | | Check if this is a amended filing |
| Stat | teme | nt of F | inancia | al Affairs 1 | for Ir | ndividuals | Filing for | Bankru | ıptcy | 12/1 |
| inform | nation. | If more spa | | ed, attach a sep | | | | | | supplying correct your name and case |
| Part 1 | : Give | e Details A | bout Your | Marital Status | and W | /here You Lived | Before | | | |
| 1. | What is | your curre | nt marital st | atus? | | | | | | |
| | П Ма | rried | | | | | | | | |
| | | t married | | | | | | | | |
| | _ | 11 | | . P. d b. | | | | | | |
| 2. | During | the last 3 ye | ears, nave y | ou lived anywher | e other | than where you liv | e now? | | | |
| | ☐ No | | | | | | | | | |
| | ✓ Yes | s. List all of t | the places y | ou lived in the las | st 3 year | rs. Do not include v | vhere you live no | OW. | | |
| | Del | btor 1: | | | Date | es Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | 63 | W. 14th Plac | ce | | _ | | | | | _ |
| | Nu | mber Street | | _ | From | | Number Stree | et | | From |
| | | | | | То | 06/2015 | | | | То |
| | | icago ghts | Illinois | 60411 | | | City | State | Zip Code | |
| | City | | State | Zip Code | | | Oity | Otate | Zip Gode | |
| | | | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | Nu | mber Street | | | From | 1 | Number Stree | et | | From |
| | | | | | То | | | | | То |
| | | | | | | | | | | |
| | City | / | State | Zip Code | | | City | State | Zip Code | |
| 3. W | /ithin th | e last 8 vea | rs. did vou e | ver live with a s | pouse o | r legal eguivalent | in a community | property stat | te or territory? | Community property states |
| | | - | - | | - | evada, New Mexico, | | | | |
| l L | No | | | | | | | | | |
| Ė | | Make sure | you fill out S | chedule H: Your | Codeb | tors (Official Form | 106H). | | | |

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, Wages, \$3040.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$12345.93 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$9133.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est. 2017 YTD Child From January 1 of current year until \$1,089.00 Support the date you filed for bankruptcy: Est. 2017 YTD LINK \$2,079.00 Est. 2016 Child For last calendar year: \$4,356.00 Support (January 1 to December 31, 2016 Est. 2016 LINK \$7,800.00 Est. 2015 Child For the calendar year before that: Support \$4,356.00 (January 1 to December 31, 2015 Est. 2015 LINK \$7,800.00

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Walker Debtor 1 Mykelle __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or

vendors
Other

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| or 1 | Mykelle | | | | alker | Case number | (if known) |
|--------------------|--|--|--|--|---|--|---|
| | First Name | | Middle Name | La | st Name | | |
| nsi corp age | ders include your porations of whic | relatives; a h you are a for a busir | any general partner an officer, director, ness you operate a | s; relatives of any person in control | general partners; par , or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| Ш | Yes. List all pay | ments to | an insider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | - | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | No | | aranteed or cosigne | - | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

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Debtor 1 Mykelle Walker Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State

Property was attached, seized, or levied.

Zip Code

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| | tor 1 Mykelle | Walker C | ase number (if known) | |
|------|---|---|-------------------------------------|-----------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you | | ancial institution, set off any amo | ounts from your |
| | ✓ No | | | |
| | | | | |
| | Yes. Fill in the details. | | | |
| | | Describe the action the creditor | took Date action was taken | Amount |
| | | | | |
| | Creditor's Name | | | |
| | Number Street | • | | |
| | | | | |
| | | Last 4 digits of account number: X | XXX- | |
| | | | | |
| | City State Zip Code | • | | |
| | 5.ty 5.tate 2.p 5545 | | | |
| | Within 1 year before you filed for bankruptcy, was appointed receiver, a custodian, or another official | | n of an assignee for the benefit o | f creditors, a court- |
| | □ No | | | |
| | ✓ No | | | |
| | Yes | | | |
| | | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did | d you give any gifts with a total value | of more than \$600 per person? | |
| | ☑ No | | | |
| | ✓ NO | | | |
| | Vac Fill in the details for each sift | | | |
| | Yes. Fill in the details for each gift. | | | |
| | Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Gifts with a total value of more than \$600 | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you | Describe the gifts | gave the | Value |
| | Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you | Describe the gifts | gave the | Value |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift Number Street | Describe the gifts | gave the | Value |
| | Person to Whom You Gave the Gift Number Street City State Zip Code Person's relationship to you Person to Whom You Gave the Gift | Describe the gifts | gave the | Value |

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| | Mykelle | Walker | Case number (if know | (N) | |
|----------|---|---|-------------------------------|-----------------------------------|------------------------|
| | First Name Middle Name | Last Name | | • | |
| | | | | | |
| Wi | thin 2 years before you filed for bankruptcy | , did you give any gifts or contribu | tions with a total value o | of more than \$600 | to any charity? |
| ✓ | No | | | | |
| È | l Yes. Fill in the details for each gift or contr | ibution | | | |
| | - | | | | |
| | Gifts or contributions to charities | Describe what you contri | buted | Date you | Value |
| | that total more than \$600 | | | contributed | |
| | | | | | |
| | Charity's Name | | | | |
| | | | | | |
| | | | | | |
| | Number Street | | | | |
| | | | | | |
| | City State Zip Code | | | | |
| | List Contain Lance | | | | |
| . 0: | List Certain Losses | | | | |
| | No Yes. Fill in the details. Describe the property you lost and how the loss occurred | Describe any insurance of Include the amount that in: | surance has paid. List | Date of your loss | Value of property lost |
| | | pending insurance claims of A/B: Property. | on line 33 of <i>Schedule</i> | | |
| | | , v2r i repelly: | | | |
| | | | | | |
| . 7. | List Certain Payments or Transfers | | | | |
| abo | thin 1 year before you filed for bankruptcy, but seeking bankruptcy or preparing a banl lude any attorneys, bankruptcy petition prepare | kruptcy petition? | | | anyone you consulte |
| abo | | kruptcy petition? | | | anyone you consulte |
| abo | out seeking bankruptcy or preparing a banl lude any attorneys, bankruptcy petition prepare | kruptcy petition? | | | anyone you consulte |
| abo | out seeking bankruptcy or preparing a banl lude any attorneys, bankruptcy petition prepare No | kruptcy petition? | services required in your ba | Date payment or transfer | Amount of payment |
| abo | out seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare No Yes. Fill in the details. | kruptcy petition? ers, or credit counseling agencies for Description and value of a | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare No Yes. Fill in the details. Semrad Law Firm | kruptcy petition? ers, or credit counseling agencies for Description and value of a | services required in your ba | Date payment or transfer | Amount of |
| abo | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare NO Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepare NO Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | but seeking bankruptcy or preparing a banklude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | kruptcy petition? ers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Pers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Was Paid Number Street City State Zip Code | Pers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Made the Payment, if Not You Person Who Was Paid | Pers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |
| abo | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois 60603 City State Zip Code Email or website address Person Who Was Paid Number Street City State Zip Code | Pers, or credit counseling agencies for Description and value of a transferred Attorney's Fee - 350.00 | services required in your ba | Date payment or transfer was made | Amount of payment |

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| Debtor ' | 1 Mykelle | Walker | Case number (if known) | |
|------------------|---|---|--|------------------------------|
| | First Name Middle Nar | ne Last Name | | |
| he | ithin 1 year before you filed for bankrupt elp you deal with your creditors or to mal o not include any payment or transfer that yo | ce payments to your creditors? | n your behalf pay or transfer any property to a | nyone who promised to |
| ∠ | No Yes. Fill in the details. | | | |
| | • | Description and value of transferred | of any property Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | |
| | Number Street | | | |
| | City State Zip Co | ode | | |
| 18. W i | | | e transfer any property to anyone, other than p | property transferred in |
| th Ind | e ordinary course of your business or fina | ancial affairs? nade as security (such as the granting | of a security interest or mortgage on your property | |
| ✓ | No | | | |
| | Yes. Fill in the details. | Decement on and value | of any | Data |
| | | Description and value of property transferred | of any Describe any property or payments received or debts pa in exchange | Date transfer was made |
| | Person Who Received Transfer | | | |
| | Number Street | | | |
| | City State Zip Co Person's relationship to you | ode | | |
| | Person Who Received Transfer | | | |
| | Number Street | | | |
| | City State Zip Co Person's relationship to you | ode . | | |
| be | ithin 10 years before you filed for bankru eneficiary? hese are often called asset-protection device | | to a self-settled trust or similar device of whic | :h you are a |
| <u> </u> | No Yes. Fill in the details. | | | |
| _ | 1 100. Till ill die details. | Description and value | of the property transferred | Date transfer was made |
| | Name of trust | | | |

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Walker Debtor 1 Mykelle Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debto | | Mykelle | | | Walker | Case | e number <i>(if</i> | known) | |
|-------|-----|--|-----------------|-------------------|--|------------------------|---------------------|--|-----------------|
| | | First Name | | Middle Name | Last Name | | | | |
| 26. | | | y in any judio | cial or administr | ative proceeding unde | r any environmen | tal law? In | clude settlements and or | ders. |
| | 넴 | No Yes. Fill in the de | tails. | | | | | | |
| | ш | | | | Court or agency | | Nature o | of the case | Status of the |
| | | Case title | | | | | | | case |
| | | | | | Court Name | | | | Pending |
| | | Case number | | | NumberStreet | | | | On appeal |
| | | Case number | | | | | | | Concluded |
| | | • | | | City State | Zip Code | | | |
| Part | 11: | Give Details A | bout Your I | Business or Co | nnections to Any Bu | usiness | | | |
| 27. | Wit | hin 4 years before | you filed for | bankruptcy, did | you own a business or | r have any of the f | ollowing c | onnections to any busine | ss? |
| | | A sole propr | ietor or self-e | employed in a tra | ade, profession, or othe | er activity, either fu | ıll-time or p | part-time | |
| | | | | | LC) or limited liability p | artnership (LLP) | | | |
| | | A partner in | | | | | | | |
| | | _ | | | e of a corporation quity securities of a cor | rporation | | | |
| | | | | | | | | | |
| | | No. None of the a Yes. Check all th | | | details below for each | business. | | | |
| | ب | | | | | ture of the busines | ss | Employer Identification | |
| | | Mary L LLC | | | Cleaning Service | | | include Social Security | number or ITIN. |
| | | Business Name | | | Clearning Service | | | EIN:xx-xxx | |
| | | 656 E. 156th Plac Number Street | ce | | _ | | | | |
| | | South Holland | Illinois | 60473 | Name of account | tant or bookkeep | er | Dates business existed | |
| | | City | State | Zip Code | | | | From 10/2016 To | |
| | | | | | | | | | |
| | | | | | Describe the nat | ture of the busines | SS | Employer Identification include Social Security | |
| | | Business Name | | | _ | | | EIN: | |
| | | | | | _ | | | Dates business existed | |
| | | Number Street | | | Name of account | tant or bookkeep | er | Dates business existed | |
| | | City | State | Zip Code | _ | | | From To | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | Describe the nat | ture of the busines | SS | Employer Identification include Social Security | |
| | | Business Name | | | _ | | | EIN: | |
| | | | | | _ | | | D. I I. | |
| | | Number Street | | | Name of account | tant or bookkeep | er | Dates business existed | |
| | | City | State | Zip Code | _ | | | From To | |
| | | | | | | | | | |
| | | | | | | | | | |

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| Debto | r 1 Mykelle | | | Walker | Case number (if known) |
|-------------------|---------------|--|--|------------------------------|---|
| | First Name | | Middle Name | Last Name | |
| | creditors, or | rs before you filed for other parties. in the details below. | bankruptcy, did you | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | | | | Date issued | |
| | | | | Date Issueu | |
| | Name | | | MM/DD/YYYY | |
| | Numbe | r Street | | | |
| | City | State | Zip Code | | |
| Part ⁻ | 12: Sign B | elow | | | |
| tr | ue and corre | ect. I understand that case can result in fin | making a false stat es up to \$250,000, c | ement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | • | /s/ Mykelle walk | | | · · · · · · · · · · · · · · · · · · · |
| | | Signature of Debtor | 1 | | Signature of Debtor 2 |
| | | Date 3/16/2017 | | | Date |
| Di | d you attacl | n additional pages to | Your Statement of F | inancial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| V | No | | | | |
| Ē | Yes | | | | |
| Di | id you pay oı | agree to pay someo | ne who is not an att | orney to help you fill out b | ankruptcy forms? |
| <u>-</u> | No | | | | |
| | Yes. Name | e of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| Prior to the filing of this statement I have received \$350 | | | Northern Distr | act of Illinois | | |
|---|-------|--|-------------------------------|-------------------------------------|--------------------------------|--|
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$4,000 Prior to the filling of this statement I have received \$390 Balance Due \$3,650 2. The source of the compensation paid to me was: Debtor Other (specify) 3. The source of the compensation paid to me is: Poblor Other (specify) 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy. b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | In re | Mykelle Walker | | Case No. | | |
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$4,000 Prior to the filling of this statement I have received \$356 Balance Due 2. The source of the compensation paid to me was: □ Debtor □ Other (specify) 3. The source of the compensation paid to me is: □ Debtor □ Other (specify) 4. □ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | Debtor | | Observa | , | |
| Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filling of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept | | | | Chapter | Chapter 13 | |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept S4,000 Prior to the filling of this statement I have received S350 Balance Due S360 2. The source of the compensation paid to me was: Debtor Other (specify) 3. The source of the compensation paid to me is: Debtor Other (specify) 4. Debtor Other (specify) I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | DISCLOSURE OF | COMPENSATIO | ON OF ATTORNEY I | FOR DEBTOR | |
| Prior to the filing of this statement I have received Balance Due S3,650 2. The source of the compensation paid to me was: □ Debtor □ Other (specify) 3. The source of the compensation paid to me is: □ Debtor □ Other (specify) 4. □ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. □ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | 1. | compensation paid to me within one | year before the filing of the | e petition in bankruptcy, or agreed | to be paid to me, for services | |
| Balance Due \$3,650 2. The source of the compensation paid to me was: Debtor | | For legal services, I have agreed to a | ccept | | \$4,000.00 | |
| The source of the compensation paid to me was: | | Prior to the filing of this statement I | have received | | \$350.00 | |
| ☑ Debtor ☐ Other (specify) 3. The source of the compensation paid to me is: ☑ Debtor ☐ Other (specify) 4. ☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. ☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | Balance Due | | | \$3,650.00 | |
| The source of the compensation paid to me is: | 2. | The source of the compensation paid | d to me was: | | | |
| ✓ Debtor | | Debtor | Other (specify | <i>(</i>) | | |
| 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | 3. | The source of the compensation paid | d to me is: | | | |
| members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | Debtor | Other (specify | /) | | |
| members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | 4. | | | on with any other person unless th | ey are | |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | members or associates of my law | w firm. A copy of the agreen | | | |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | 5. | a. Analysis of the debtor's finar | | | | |
| d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | b. Preparation and filing of any | petition, schedules, statem | ents of affairs and plan which may | be required; | |
| | | c. Representation of the debtor | at the meeting of creditors | and confirmation hearing, and any | adjourned hearings thereof; | |
| 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: | | d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; | | | | |
| | 6. | By agreement with the debtor(s), the | above-disclosed fee does r | not include the following services: | | |
| | | | | | | |
| | | | | | | |
| CERTIFICATION | | | | | | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. | | | te statement of any agreem | ent or arrangement for payment to | me for representation of the | |
| 3/16/2017 /s/ Amy Gerstein | | 3/16/2017 | | /s/ Amy Gerstein | | |
| Date Signature of Attorney | | Date | | Signature of Attorney | | |
| Semrad Law Firm | | | | Semrad Law Firm | | |
| Name of law firm | | | | Name of law firm | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Walker, Mykelle | Case No | | |
|-----------------|--|---|---------------------------------------|--|
| Debtor(s) | | Case IVI. | | |
| | | Chapter. | Chapter13 | |
| | VERIFICATIO | ON OF CREDITOR MA | TRIX | |
| Ti knowledge | he above named Debtors hereby verify that the. | ne attached list of creditors is t | true and correct to the best of their | |
| Date: | 3/16/2017 | /s/ Walker, Myk Walker, Mykelle Signature of De | | |

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Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

Honor Finance 1731 CENTRAL ST EVANSTON, IL, 60201

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

AT&T PO Box 537104 Atlanta, GA, 30353

PENN CREDIT 916 S 14TH ST PO Box 988 Harrisburg, PA, 17104

Village of South Holland 16226 Wausau Avenue South Holland, IL, 60473

Illinois Tollway PO Box 5544 Chicago, IL, 60680

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

Harris & Harris LTD 111 West Jackson Boulevard Suite 400 Chicago, IL, 60604

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Check into Cash 2157 W Jefferson St Joliet, IL, 60435

Check N Go 7101 W North Ave Oak Park, IL, 60302

Sprint 6391 Sprint Overland Park, KS, 66251

Chen, Jun 400 Kenwood Round Lake, IL, 60073

Lake County Housing Authority 33928 US-45 Grayslake, IL, 60030

Credit Collection Services Commercial 725 Canton Street Norwood, MA, 02062

Allstate Insurance Company 2775 Sanders Road Northbrook, IL, 60062

Municipal Collection Services, Inc. P.O. Box 327 Palos Heights, IL, 60463

Village of Hillside Parking Po Box 7724 Carol Stream, IL, 60197

IDES-Benefit Payment Control Division 28542 Network Pl Chicago, IL, 60673

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

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D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F.

ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 3/16/2017 | |
|----------|--------------------|------------------------|
| Signed: | | 1. |
| /s/ Myke | lle Walker / Culle | al all |
| | | /s/ Amy Gerstein |
| Debtor(s | s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Local Bankruptcy Form 23c

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| Debtor 1 Mykelle First Name | Walker Middle Name Last Nam | Case number (if kno | wn) |
|---|--|--|---|
| | estions for Reporting Purposes | e | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily cons "incurred by an individual prima No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily busin | arily for a personal, family, or hous ness debts? Business debts are de ment or through the operation of the | ehold purpose." ebts that you incurred to obtain he business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | | roperty is excluded and administrative ured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| ^{20.} How much do you estimate your liabilities to be? | □ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | |
| For you | correct. If I have chosen to file under Chapter of title 11, United States Code. I undunder Chapter 7. If no attorney represents me and I did out this document, I have obtained at I request relief in accordance with the I understand making a false statement connection with a bankruptcy case of both. 18 U.S.C. §§ 152, 1341, 1519, | 7, I am aware that I may proceed, erstand the relief available under element pay or agree to pay someone and read the notice required by 11 to chapter of title 11, United States at, concealing property, or obtaining an result in fines up to \$250,000,000 | who is not an attorney to help me fill J.S.C. § 342(b). Code, specified in this petition. |
| | /s/ Mykelle Walker / / / / Signature of Debtor 1 | Signature of | of Debtor 2 |
| | Executed on 3/16/2017 MM / DD / YYY | Executed | on |

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| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Middle Name Last Name | Debtor 1 | Mykelle | | Walker | |
|--|---------------------|---------------------------|-------------|--------------------|-----|
| (Spouse, if filing) First Name Middle Name Last Name | | First Name | Middle Name | Last Nam | ne |
| The Name of the Na | Debtor 2 | | | | |
| | (Spouse, if filing) | First Name | Middle Name | Last Nam | ne |
| United States Bankruptcy Court for the: Northern District of Illinois | United States E | Bankruptcy Court for the: | Northern | District of Illino | ois |
| (State) | | | | (Stat | te) |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| J.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
|---|---|--|--|--|
| Part 1: Sign Below | | | | |
| Did you pay or agree to pay someone who is NOT an attorney to | o help you fill out bankruptcy forms? | | | |
| ✓ No | | | | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| | | | | |
| | | | | |
| Under penalty of perjury, I declare that I have read the summar that they are true and correct. | ry and schedules filed with this declaration and | | | |
| /s/ Mykelle Walker Signature of Debtor 1 | Signature of Debtor 2 | | | |
| Date 3/16/2017 MM/DD/YYYY | Date MM/DD/YYYY | | | |

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| Debte | or 1 Mykelle | Walker | Case number (if known) |
|-------|--|---------------------------|---|
| | First Name Middle Name | Last Name | |
| | Within 2 years before you filed for bankruptcy, did you creditors, or other parties. | ı give a financial staten | nent to anyone about your business? Include all financial institutions, |
| | No Yes. Fill in the details below. | | |
| | Tool I ill ill all details solotti | Data issued | |
| | | Date issued | |
| | Name | MM/DD/YYYY | _ |
| 2.5 | Number Street | | · |
| | City State Zip Code | | |
| | Oily State Zip Sode | | |
| Part | 12: Sign Below | | |
| tr | rue and correct. I understand that making a false state | ement, concealing prop | ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | /s/ Mykelle Walker | ller | Signature of Debtor 2 |
| | 3 | | Date |
| | Date 3/16/2017 | | Date |
| D | oid you attach additional pages to Your Statement of F | inancial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| | 7 No | | |
| | Yes | | |
| D | oid you pay or agree to pay someone who is not an atto | orney to help you fill ou | t bankruptcy forms? |
| Ī, | 7 No | | |
| | Yes. Name of person | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Walker, Mykelle | Case No. | Case No. | | |
|--------|--|---|---------------------------------------|----|--|
| | Debtor(s) | | | | |
| | | Chapter. | Chapter13 | _ | |
| | VERIFICATIO | N OF CREDITOR MA | TRIX | | |
| nowle | The above named Debtors hereby verify that th dge. | e attached list of creditors is | true and correct to the best of their | ı, | |
| | | | | | |
| ate: | 3/16/2017 | /s/ Walker, Myk Walker, Mykelle Signature of Di | Tr. Garage | | |

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| Debto | or 1 Mykelle | MOLIUM N | Walker | Case number (if known) | |
|--------|---|--|-------------------------------|--|-------------|
| | First Name | Middle Name | Last Name | | |
| 16. | Calculate the median far | nily income that applies to | you. Follow these steps: | | |
| | 16a. Fill in the state in which | ch you live. | Illinois | | |
| | 16b. Fill in the number of p | people in your household. | 5 | | |
| | 16c. Fill in the median fam | ily income for your state and s | size of | | \$98,480.00 |
| | household | d in the concrete instructions | | a list of applicable median income amounts, go online | |
| 17 | How do the lines compar | * | ior tins ioim. Tins iist ma | y also be available at the bankruptcy clerk's office. | |
| | 17a. Line 15b is less t | han or equal to line 16c. On t | | orm, check box 1, <i>Disposable income is not determine</i> of <i>Disposable Income</i> (Official Form, 122C-2). | ed |
| | 17b. Line 15b is more <i>U.S.C. § 1325(b)</i> | than line 16c. On the top of | page 1 of this form, check | k box 2, <i>Disposable income is determined under 11</i> ble Income (Official Form 122C-2). On line 39 of th | at |
| Part : | 3: Calculate Your Co | mmitment Period Under | 11 U.S.C. §1325(b)(| 4) | |
| 18. | Copy your total average | monthly income from line 1 | 1. | | \$1,106.28 |
| 19. | | | | not filing with you, and you contend that calculating tour spouse's income, copy the amount from line 13. | ne |
| | 19a. If the marital adjustme | ent does not apply, fill in 0 on | line 19a. | | -\$0.00 |
| | 19b. Subtract line 19a fro | om line 18. | | | \$1,106.28 |
| 20. | Calculate your current m | onthly income for the year. | Follow these steps: | | |
| | 20a. Copy line 19b. | | | | \$1,106.28 |
| | Multiply by 12 (the nu | umber of months in a year). | | | x 12 |
| | 20b. The result is your curr | ent monthly income for the ye | ear for this part of the form | n. | \$13,275.36 |
| | 20c. Copy the median fam | ily income for your state and s | size of household from lin | ne 16c. | \$98,480.00 |
| 21. | | | | | |
| | Line 20b is less than li commitment period is | | ered by the court, on the | top of page 1 of this form, check box 3, The | |
| | | or equal to line 20c. Unless o eriod is 5 years. Go to Part 4. | therwise ordered by the c | ourt, on the top of page 1 of this form, check box | |
| Part • | 4: Sign Below | | | | |
| | By signing here, I decl | are under penalty of perjury th | at the information on this | statement and in any attachments is true and correct. | |
| | | 22 00 | 0, | | |
| | /s/ Mykelle Wa | 111000 | Mer * | ignature of Debtor 2 | |
| | | | | a de la companya de | |
| | Date 3/16/2017 MM/DD/YY | Ϋ́Υ | L | MM/DD/YYYY | |
| | | NOT fill out or file Form 122 out Form 122C-2 and file it v | | of that form, copy your current monthly income from | line 14 |